

P07000124776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2007 NOV 19 AM 8:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: _____

AM, Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Mario Alvarez

Name (Printed or typed)

6181 SW 19 ST

Address

Miami, FL, 33155

City, State & Zip

786-541-6021

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 7, 2007

MARIO ALVAREZ
6181 SW 19 ST.
MIAMI, FL 33155

SUBJECT: AM CIRCLE, INC.
Ref. Number: W07000051287

We have received your document for AM CIRCLE, INC. However, the document has not been filed and is being returned for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

An effective date **may** be added to the Articles of Incorporation **if a 2008 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Regulatory Specialist II

Letter Number: 307A00060841

RECEIVED
07 NOV 19 AM 8:00
DIVISION OF CORPORATIONS

FILED

2007 NOV 19 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

AM Circle, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

6181 SW 19 ST Miami, FL 33155

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

~~to~~ AM, Inc. will act as an agent to local small
Business Projects to local contractors. We are in
the business to make business

ARTICLE IV SHARES

The number of shares of stock is:

50 to Allan Valdes 50 to Mario Alvarez

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Allan Valdes, co-owner, 2102 Dexter Ave #202
Silver Spring, MD 20902
Mario Alvarez, Owner 6181 SW 19 ST
Miami FL 33155

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

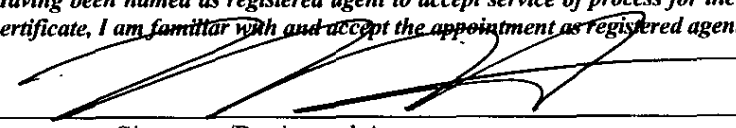
Mario Alvarez
6181 SW 19 ST Miami FL 33155

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

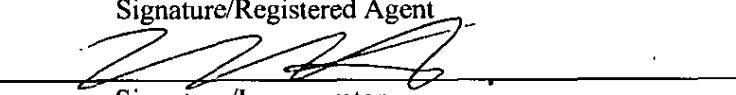
Allan Valdes, 2102 Dexter Ave #202, Silver Spring, MD 20902
Mario Alvarez 6181 SW 19 ST Miami FL 33155

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

Date



Signature/Incorporator

10-4-07

Date



Signature/Incorporator

co-owner

10-4-07

Date